U.S. Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 **LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT**

Form approved
Office of Management and Budget No 1215-0188 Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines, or civil penalties as provided by 29 U S C 439 or 440

For Official La	Only
NUG 1 7 2005	<u>.</u>)
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

	_			
1 File Number U 8128	2 Fiscal Year Covered From			
	1 / 1 / 2004 Through 12 / 31 / 2004			
3 Name and address of person filing	4 Name file number and address of labor organization			
Name CHROSTOPHE G HALL	Name UNITED ASSOCIATION OF PLUMBERS LOCAL 342			
	Labor Organization File Number 033-320			
P O Box, Bidg Room No If any	P O Box Building and Room Number if any			
Street 935 DETROIT AVENUE	Street 935 DETROIT AVENUE			
City CONCORD	City CONCORD			
State California ZiP Code + 4 94518-2501	State California ZIP Code + 4 94518-2501			
5 Position in labor organization EXAMINING BOARD				
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions) A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent				
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income			
Name				
Trade Name if any				
PO Box Bidg Room No if any				
Street	7 b Amount.			
City				
State ZIP Code + 4				
Signature				
15 Signature and verification The undersigned declares under penalty of Penury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions.)				
Signed I for I Hall	On 8/11/05 (925) 686 - 6880 Telephone Number			
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Name of Person Filing CHROSTOPHERHALL	···	File Number U		
B Held an interest in or derived income or economic benefit with monetary valuabstantial part of which consists of buying from selling or leasing to or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or included with your labor organization or with a trust in which your labor organization.	wise dealing with the busines vely seeking to represent, or directly to or otherwise	is.		
8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	9 Business deals with a Labor Organiza b Trust c Employer			
10 tf 9 b or 9 c is checked give trust or employer's name Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	11 a Nature of such deal 11 b Approximate dollar val 12 a Nature of interest he	lue of such dealing		
	12 b Amount		-	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value				
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Trade Name if any: P O Box, Bldg Room No if any Street City State ZIP Code + 4	14 a Nature of payment.	\	X.	
13 b Is the Business an Employer or Consultant 7	14 b Amount of payment	·	A	

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"I have made a diligent search of employers, businesses and/or vendors with which the union is involved. I have made as complete disclosure as I am advised by counsel that I am required to make, and I have made such required disclosures that, after a search of our records, I can now recall."

Chris Hall

Date